



Jogyakarta and Central Java Earthquake

Summary

- There is a lack of effective leadership in health coordination meetings. There is a strong need for support from UN Agencies for an effective coordination mechanism.
- Despite structural integrity in the hospitals, patients refused to be admitted.
- There is an overload in hospital capacity.
- Potential threat of nosocomial infection. Screening of in patients and out patients is in place to avoid possible cross infection. Infected patients are placed in separate areas.
- Lack of bed sheets, mattresses and other consumables medical equipment such as sterile kits for operations, stitching materials, x-rays films and pop plasters.
- Human resources are adequate, but need improvements in management. Hospital management needs to be strengthened

Current Situation

MOH Assistance to Yogyakarta-Central Java Earthquake

No.	Assistance	Amount	Unit
Health Facilities			
	Ambulance	14	unit
	Ambulance Rapid	4	unit
	Cinic Car	2	unit
	Operational Car		
	Water Purifier	2	unit
	Motorcycle	-	unit
Logistics and Equipment			
	Medicine	32	koli/bag
	Body Bag	800	pieces
	Field Hospital Tent	4	set
	Veld Bed	40	pieces
	Field Toll Kit	2	pieces
	Comand Tent	2	set
	Water for Injection	1	box
	Catgut Plain 3/0	1	box
	Lidocain Komp. Injection	13	box @ 30 ampul
	Surgery Needle No.9	25	pieces
	Surgery Needle No.14	25	pieces
	RL, Antibiotics, etc	3	truck
	ATS 1500 IU	1000	ampul
	ATS 20,000 IU	1000	ampul

Casualties of Yogyakarta-Central Java Earthquake

No	Location	Death	Number of Patient	
			In Patient	Out Patient
	Yogyakarta Province	3464	5831	4608
	Central Java Province	1672	2867	1330
Total		5136	8698	5938



DHO – People are working outside of buildings because of concerns for safety. The District Health Office had minimal loss as only one staff was injured. The DHO has set up an information desk at the Pendopo Bupati. They have organized the desk and are chairing the daily health coordination meeting. Many international and local NGOs attended the coordination meetings.

Hospitals – The director of Bantul Public Hospital has stated there are enough supplies of TT vaccines. No acute pathology has been reported in cases of psychiatry. The hospitals have managed triage and the separating of infected patients in separate wards. In term of care of the injured patients, both the hospitals has putting places the best of their capacity. But the increased number of in and out patients has revealed the need of support for a better human resources and hospitals management.

IOM is targeting the mobilization of +/- 1500 patients to their homes and 600 patients will be referred to other hospitals. It is agreed that IOM will provide camp management. Area of coverage is not known, possibly Klaten, Bantul and Yogyakarta.

Bantul Health Centers – The number of health centers known to be fully destroyed in Bantul were 11 out of total of 26 health centers (Jetis I, Jetis II, Plered, Imogiri I, Imogiri II, Bambanglipuro, Sewon II, Bantul I, Dlingo II, Banguntapan II, Piyungan,). Four health centers were moderately damaged (according to the head of DHO), which were Kasian I, Sewon I and two others. One health center was reported mildly damaged and the other 10 have not reported yet.

Bantul Sub-Health Center(Pustu) – Twenty sub-health centers out of 75 are reportedly fully destroyed, three were moderately destroyed and the others sub-health centers have not reported yet.

Health personnel – Two health workers were reported as dead (from Sewon 1, Jetis 2) as of 29 May.

Health Staff Assistance up to 28 May 2006		
	Specialist	50
	General Practitioner	100
	Nurse and Paramedic	376
	Foreign Medical Staff	16
Total Health Staff		542

Communication – Mobile communication was not available in Bantul during the first two days, but is now available. Land line telecommunication has been working since the beginning of the crisis.

Electricity has not yet recovered. However, in Bantul Public hospital the electricity is functioning.

Transportation – Transportation to the location affected by the earthquake, especially to the remote areas, was difficult as the roads were packed with vehicles. There are people who want to get out of their houses and also people who want to come to provide aid during the crisis. The situation has hindered flow of supports to the area.



State airlines Garuda Indonesia and Merpati pledged to give free rides to aid and rescue workers bound for the quake-stricken province of Yogyakarta.

Priority Needs

The List of Assistance Needed for Yogyakarta-Central Java Earthquake

Source : District Health Office of Sleman

No.	Assistance	Unit	Amount
Medicine			
	Amoxycilin Caplet 500 mg	Box @100 Caplet	400
	Eritromisin Caps 500 mg	Box @100 Caplet	200
	Mefenammat Acid	Box @1000 Tablet	20
	Buscopan	Box @100 Tablet	200
	Profenid Injection	Ampul	500
	Profenid Injection	Box @100 Tablet	200
	Parasetamol Tablet	Box @1000 Tablet	300
	Primperan Tablet	Box @100 Tablet	200
	ATS Injection	Flacon	200
	Lidocain Comp. Injection	Ampul	500
	Lidocain Injection	Ampul	200
	Ringer Laktat Fluid	Box @10 Flabot	50
	Dextroses 5% Fluid	Box @10 Flabot	50
	NaCl 0.9% Fluid	Box @10 Flabot	50
Medical Equipment			
	Minor Surgery	Set	10
	Hecting Set	Set	10
	Surgery Knife	Piece	500
Supplies			
	Sofratul	Piece	400
	Hipavix Band	Piece	200
	Kasa	Piece	100
	Gauze Bandage	Piece	100
	Perhidrol Solution	Bottle 100 cc	100
	Zeide	Piece	200
	Cat Gut	Piece	200
	Sterile Kasa	Piece	200
	Betadine Solution	Bottle 60 cc	200
	Abocath	Piece	200
	Adult Infus Set	Piece	500
	Children Infus Set	Piece	300
	Transfusion Set	Piece	300
	Spuit 3 cc	Box 100 Piece	10
	Spuit 5 cc	Box 100 Piece	10
	Handschoen	Piece	300
	Gips	Piece	250
	Alcohol 70%	Bottle 500 cc	20



Hospitals – There are 3 hospitals in Bantul District (Muhammadiyah, Elizabeth and the District Public Hospital Panembahan Suropati). All of them are treating patients at four times their capacity. Many of the patients are still outside, putting them in risk of infection and creating hygiene and sanitation problems. Among 6 deliveries conducted in Bantul hospitals since the earthquake, there was one maternal death related to the chaotic situation.

In Klaten, Suradji Tirtokusodo Hospital, there are 575 patients with earthquake injuries and the bed capacity is 306. Area hospitals have enough human resources as many volunteers have come from other provinces. Despite having 6 operating rooms, only 2 are functioning because of lack of anesthetic equipment. There have been no deliveries since the disaster.

Logistics - During the first health coordination meeting a huge amount of supplies were unloaded in the hall of the government building without any proper logistic documentation. Considering past experience in Aceh that highlighted the importance of logistic management, this is the crucial area that has to be supported by the UN agencies.

Supplies – Drugs and medicines are needed to treat patients, especially antibiotics, analgesic and anesthetic injections. Other needs include:

- Big tents that can be used as field hospitals and family tents
- ORS
- Power supply, lantern and generators
- Food
- ATS

Food – Food and water distribution was not properly distributed to reach all of the beneficiaries and was raised as an issue by the province CDC Manager.

WHO Action

Logistic and Equipment (WHO Assistance)			
	New Emergency Health Kit (NEHK 98)	3	set
	Surgical Kit	1	set
	Dressing	6	box
	Rolls of Plastic	4	roll
	Ringer Lactate	20	box

Emergency Operations – 2 EHA staff, 2 logistics officers, 1 driver and 1 WHO technical officer participating in the UN Special Mission were deployed to Jogjakarta in support of emergency operations. 2 CDC officers and an additional logistician will be deployed today.

Health Coordination – WHO was present in the first coordination meeting in Bantul. The participation of donors and NGOs very high but unfortunately there was no strong leadership from government health officials. The large number of local NGOs present in health coordination meeting included various international NGOs that responded to Aceh Tsunami Emergency. While NGOs and the Donors present may have expected guidance from the DHO, the DHO was unprepared to coordinate the meeting. The DHO Plans is to have continuous daily meeting. Neither a strategic plan nor clear guidance was presented to the donors.



Surveillance – WHO has placed 2 epidemiologist in Jogyakarta to establish a communicable disease surveillance network in cooperation with the Ministry of Health and local health actors.

Supplies – Additional medical supplies will be flown in to replenish stocks used for earthquake operations.